

**Work Order ID 152410**

Monday, October 24, 2016 11:40:35 AM

**\*152410\***

Page 1

Item ID: D5149-5 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Step Cap  
Start Date: 10/21/2016 Start Qty: 10.00 **\*10\*** Cust Item ID:  
Required Date: 10/24/2016 Req'd Qty: 10.00 **\*10\*** Customer:  
Reference:

Approvals: Process Plan: DAS 21 Date: OCT 24 2016 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: 9-89 Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                                                               | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|----------------------------------------------------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr                       | Revision Nbr                                                                           |                      |         |        |              |               |               |                  |                |
| D5149                          | D                                                                                      |                      |         |        |              |               |               |                  |                |
| 100                            | FLOW WATER JET                                                                         | 0.00                 |         |        |              |               |               |                  |                |
| <b>*100*</b>                   |                                                                                        |                      |         |        |              |               |               |                  |                |
| Waterjet                       | Memo                                                                                   | 0.07                 |         |        |              |               |               |                  |                |
| FLOW CNC Waterjet              | 1-Cut as per Dwg<br>Dwg Rev: <u>DD</u><br>Prog Rev: <u>DD</u><br>2-Deburr if necessary |                      |         |        |              |               |               |                  |                |
| 110                            | QC2- Inspect parts off machine FAI/FAIB                                                | 0.00                 |         |        |              |               |               |                  |                |
| <b>*110*</b>                   |                                                                                        |                      |         |        |              |               |               |                  |                |
| QC                             | Memo                                                                                   | 0.02                 |         |        |              |               |               |                  |                |
| Quality Control                |                                                                                        |                      |         |        |              |               |               |                  |                |
| 120                            | QC8- Inspect parts - second check                                                      | 0.00                 |         |        |              |               |               |                  |                |
| <b>*120*</b>                   |                                                                                        |                      |         |        |              |               |               |                  |                |
| QC                             | Memo                                                                                   | 0.03                 |         |        |              |               |               |                  |                |
| Quality Control                |                                                                                        |                      |         |        |              |               |               |                  |                |

DAS  
38  
9-89  
NOV 20 2016

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                       |                                                                                                                    |
| Date : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Step #: _____                                                                                                                                                                      | QTY Effective : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | MRB (QSI042) Approval |                                                                                                                    |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                       | Completed By<br><br><br>Lead hand / Supervisor<br>Approval Verification<br><br><br>QC / QA Coordinator<br>Approval |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |                                                                                                                    |
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| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div>           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div>           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div>           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Mislabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div>           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |  |                       |                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    | OTHER : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                       |                                                                                                                    |

**Work Order ID 152410**

Monday, October 24, 2016 11:40:35 AM

**\*152410\***

Page 2

Item ID: D5149-5

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Step Cap

Start Date: 10/21/2016 Start Qty: 10.00

**\*10\***

Cust Item ID:

Required Date: 10/24/2016 Req'd Qty: 10.00

**\*10\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

Identify as per dwg &amp; Stock Location: \_\_\_\_\_

0.00

**\*130\***

Packaging

Memo

LOCATION: WA001

0.02

Packaging

DAS  
6  
9-89

NOV 08 2016

140

QC21 - Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.17

Quality Control

16/11/8 JF  
D16.11-8



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                 |  |
| Date : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Step #: _____                                                                                                                                                                      | QTY Effective : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | MRB (QSI042) Approval                           |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                 |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | QC / QA Coordinator<br>Approval                 |  |
| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div>           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div>           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div>           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Mislabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div>           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |  |                                                 |  |
| OTHER : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                 |  |

# Picklist Print

Monday, October 24, 2016 11:40:34 AM

Page 1  
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Work Order ID: 152410

**\*152410\***

Parent Item: D5149-5

**\*D5149-5\***

Parent Item Name: Step Cap

Start Date: 10/21/2016

Required Date: 10/24/2016

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A NEW ISSUE 14-12-08 JLM VERIFIED BY:DD IPP  
REV:B 15.11.09 AS PER DWG REV.C DD VERF:JLM

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| M6061T6S.125                    |                        | Purchased     |             | No                  |                  |                 | sf                 | 61.6800        |             | 0.292316     |               |                |        |
| <b>*M6061T6S 125*</b>           |                        |               |             |                     |                  |                 |                    |                | <b>**</b>   |              |               |                |        |
| 6061-T6 .125 Sheet              |                        |               |             |                     |                  |                 |                    |                |             |              |               |                |        |

pc 16/11/07

Location

Loc Qty

Loc Code

MAT020

61.68

m134696

9.51

m134982

5.12

m135377

15.05

m135860

32

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\_\_\_\_\_  
\_\_\_\_\_  
4  
\_\_\_\_\_

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

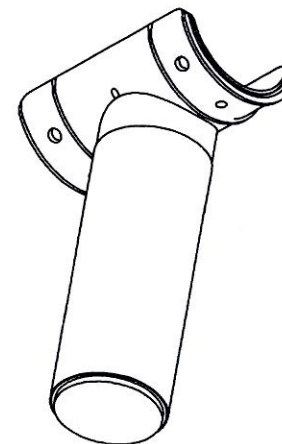
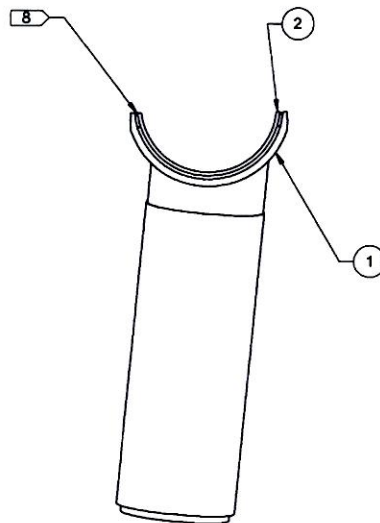
Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>             Skid-tube <input type="checkbox"/><br/>             Machining <input type="checkbox"/><br/>             Thermoforming <input type="checkbox"/><br/>             Large Fab <input type="checkbox"/> </div> <div>             Cross tube <input type="checkbox"/><br/>             Small Fab <input type="checkbox"/><br/>             Finishing <input type="checkbox"/><br/>             Composite <input type="checkbox"/> </div> <div>             Water Jet <input type="checkbox"/><br/>             Prod. Eng. Coord. <input type="checkbox"/><br/>             Rec/Store/Packaging <input type="checkbox"/><br/>             Supplier <input type="checkbox"/> </div> <div>             Engineering <input type="checkbox"/><br/>             Quality <input type="checkbox"/><br/>             Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                              |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Step #:                                                                                                                                                                            | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | MRB (QSI042) Approval                        |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Completed By                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Lead hand / Supervisor Approval Verification |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | QC / QA Coordinator Approval                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                              |  |
| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>             Environment <input type="checkbox"/><br/>             Design <input type="checkbox"/><br/>             Doc/Data <input type="checkbox"/><br/>             Equip/Tooling <input type="checkbox"/><br/>             Handling/Pre <input type="checkbox"/><br/>             Material <input type="checkbox"/><br/>             Internal Transport <input type="checkbox"/><br/>             Tribal Knowledge <input type="checkbox"/><br/>             LOA <input type="checkbox"/><br/>             Substation <input type="checkbox"/><br/>             Past Expiry Date <input type="checkbox"/><br/>             Misidentified <input type="checkbox"/> </div> <div>             No Re-verification <input type="checkbox"/><br/>             Operator <input type="checkbox"/><br/>             Offset/Setup <input type="checkbox"/><br/>             Supplier <input type="checkbox"/><br/>             Training <input type="checkbox"/><br/>             Use for Testing <input type="checkbox"/><br/>             Poor Information <input type="checkbox"/><br/>             Rushing <input type="checkbox"/><br/>             Product Improvement <input type="checkbox"/><br/>             Process Improvement <input type="checkbox"/><br/>             Manufacturing Process <input type="checkbox"/><br/>             Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>             Pressure/Forced <input type="checkbox"/><br/>             Bending <input type="checkbox"/><br/>             Centre Not Concentric <input type="checkbox"/><br/>             Cracks <input type="checkbox"/><br/>             Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>             Cuffs <input type="checkbox"/><br/>             Crushing <input type="checkbox"/><br/>             Heat Treat <input type="checkbox"/><br/>             Wave/Twist in Tube <input type="checkbox"/><br/>             Marks/Chatter <input type="checkbox"/> </div> <div>             Temperature/Cure <input type="checkbox"/><br/>             Set-up <input type="checkbox"/><br/>             BOM/Route <input type="checkbox"/><br/>             Broken/Damage/Defect <input type="checkbox"/><br/>             Inspection Incomplete/Unqualified <input type="checkbox"/><br/>             Contamination <input type="checkbox"/><br/>             Countersink <input type="checkbox"/><br/>             Cut Too Short <input type="checkbox"/><br/>             Instructions Incomplete/Unclear <input type="checkbox"/><br/>             Drill Holes <input type="checkbox"/> </div> <div>             Power Loss/Surge <input type="checkbox"/><br/>             Folio/Program <input type="checkbox"/><br/>             Grain <input type="checkbox"/><br/>             Weld <input type="checkbox"/><br/>             Wrong Stock Pulled <input type="checkbox"/><br/>             Out of Sequence <input type="checkbox"/><br/>             Off-set <input type="checkbox"/><br/>             Mislabeled <input type="checkbox"/><br/>             Fit/Function <input type="checkbox"/><br/>             Misaligned/off center <input type="checkbox"/> </div> <div>             Positioned Wrong <input type="checkbox"/><br/>             Outside Dimensions <input type="checkbox"/><br/>             Over/Under tolerance <input type="checkbox"/><br/>             Part Incorrect <input type="checkbox"/><br/>             Part Lost/Missing <input type="checkbox"/><br/>             Part Moved <input type="checkbox"/><br/>             Drawing <input type="checkbox"/><br/>             Finish <input type="checkbox"/><br/>             Misread <input type="checkbox"/><br/>             Turning Sequence <input type="checkbox"/> </div> </div> |  |                                              |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                              |  |





| ITEM | QTY | P/N        | DESCRIPTION            |
|------|-----|------------|------------------------|
|      | X   | D5149-041  | FWD STEP ASSEMBLY      |
| 1    | 1   | D5149-041W | FWD STEP BASE WELDMENT |
| 2    | 1   | D5151-1    | CLAMP CUSHION          |



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WITHOUT NOTICE  
WORK ORDER  
NO. 152 410 MJS  
16-10-24

# **D5149-041 FWD STEP ASSEMBLY**

## **NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.69 lbs
- 8) BOND D5151-1 CUSHION TO D5149-041W BASE WELDMENT USING 3M 1300L ADHESIVE

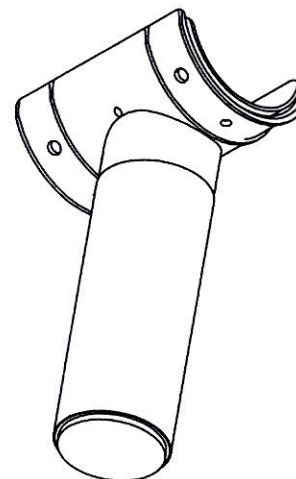
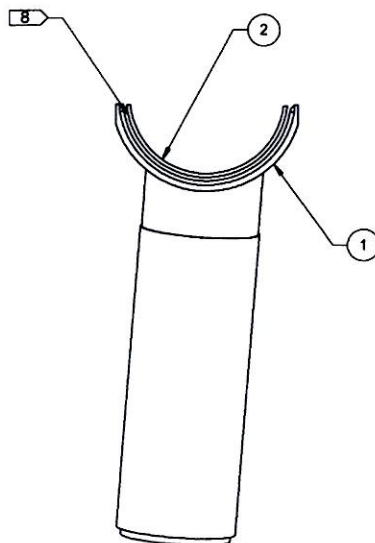
| D          | DIAMETER OF D5149-5 CAP IS NOW 1.88 WAS 2.00 TO EASE WELDING PROCEDURE, UPDATE TOLERANCES | AP                                                                                                                                                                                                                                                                                        | 15.10.20      |
|------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| C          | ANTI-KID FINISH DIM MODIFIED DUE TO INTERFERENCE WITH WELD (SHT 3 & 4)                    | AP                                                                                                                                                                                                                                                                                        | 15.04.27      |
| B          | COMPLETE RE-DESIGN, SEE PREVIOUS REV FOR DETAILS                                          | DB                                                                                                                                                                                                                                                                                        | 15.01.14      |
| A          | NEW ISSUE                                                                                 | DB                                                                                                                                                                                                                                                                                        | 14.10.25      |
| REV.       | DESCRIPTION                                                                               | BY                                                                                                                                                                                                                                                                                        | DATE          |
| DESIGN     | DB                                                                                        | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                  |               |
| DRAWN      | AP                                                                                        |                                                                                                                                                                                                                                                                                           |               |
| CHECKED    | DB                                                                                        | DRAWING NO.                                                                                                                                                                                                                                                                               | REV. D        |
| MFG. APPR. | DD                                                                                        | D5149                                                                                                                                                                                                                                                                                     | SHEET 1 OF 11 |
| APPROVED   | WM                                                                                        | TITLE                                                                                                                                                                                                                                                                                     | SCALE         |
| DE APPR.   | DS                                                                                        | STEP ASSEMBLY                                                                                                                                                                                                                                                                             | NTS           |
| DATE       | 15.10.20                                                                                  | <small>COPYRIGHT © 2014 BY DART AEROSPACE LTD<br/> THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR LOANED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> |               |

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EN 15-142

APPROVED  
CM



| ITEM | QTY | P/N        | DESCRIPTION            |
|------|-----|------------|------------------------|
|      | X   | D5149-043  | AFT STEP ASSEMBLY      |
| 1    | 1   | D5149-043W | AFT STEP BASE WELDMENT |
| 2    | 1   | D5151-3    | CLAMP CUSHION          |



**D5149-043 AFT STEP ASSEMBLY**

**NOTES:**

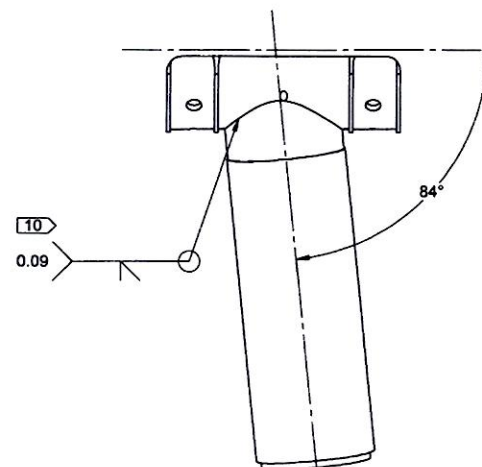
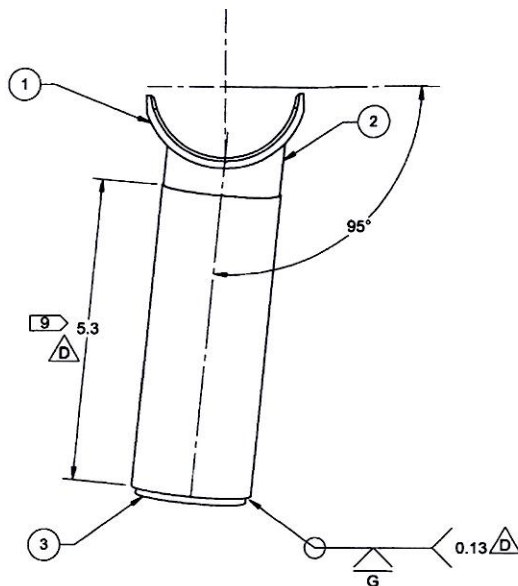
- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.87 lbs
- 8) BOND D5151-3 CUSHION TO D5149-043W BASE WELDMENT USING 3M 1300L ADHESIVE

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|            |          |                                                                                                                                                                                                                                                                                          |               |
|------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| DESIGN     | DB       | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                                |               |
| DRAWN      | AP       | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                              |               |
| CHECKED    | DB       | DRAWING NO.                                                                                                                                                                                                                                                                              | REV. D        |
| MFG. APPR. | DD       | D5149                                                                                                                                                                                                                                                                                    | SHEET 2 OF 11 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                                    | SCALE         |
| DE APPR.   | DS       | STEP ASSEMBLY                                                                                                                                                                                                                                                                            | NTS           |
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| ITEM | QTY-041W | P/N        | DESCRIPTION            |
|------|----------|------------|------------------------|
|      | X        | D5149-041W | FWD STEP BASE WELDMENT |
| 1    | 1        | D5149-1    | FWD STEP BASE          |
| 2    | 1        | D5149-3    | FWD STEP               |
| 3    | 1        | D5149-5    | STEP CAP               |



**D5149-041W FWD STEP BASE WELDMENT**

**NOTES:**

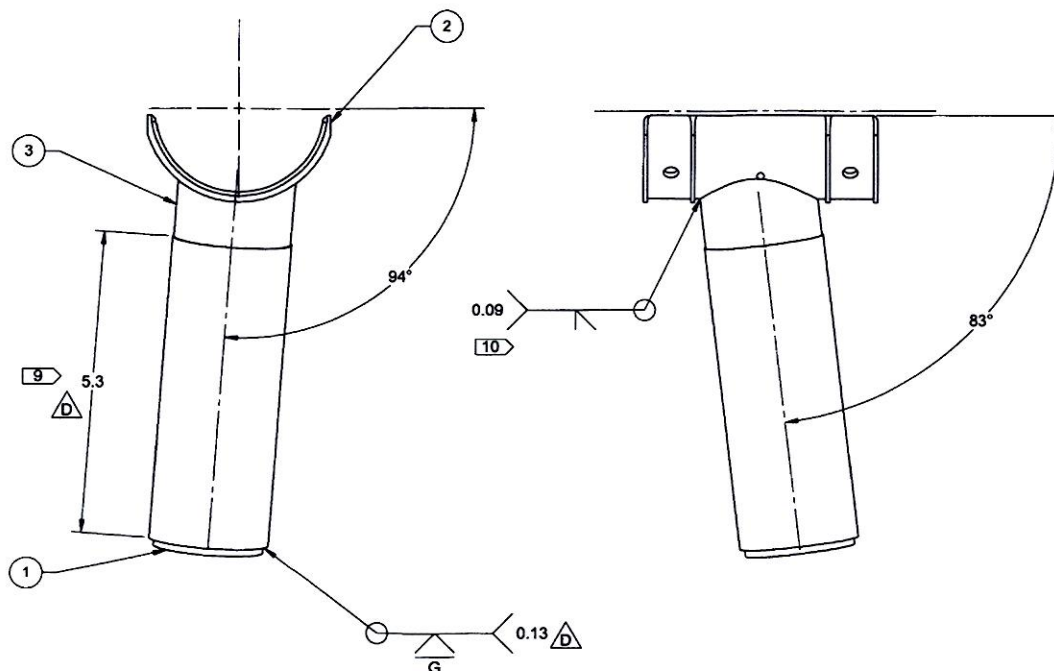
- 1) MATERIAL: N/A
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
POWDER COAT "WHITE" (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.67 lbs
- 8) WELDING PER DART QSI 004
- 9) APPLY BLACK ANTI-SKID PAINT TO STEP TUBE, ALL AROUND PER DART QSI 005 4.4
- 10) ALIGN D5149-3 FWD STEP WITH EDGE OF ALIGNMENT HOLES IN D5149-1 FWD STEP BASE PRIOR TO WELDING

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2015-11-04

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|            |          |                                                                                                                                                                                                                                                                                         |               |
|------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| DESIGN     | DB       | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                               |               |
| DRAWN      | AP       | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                             |               |
| CHECKED    | DB       | DRAWING NO.                                                                                                                                                                                                                                                                             | REV. D        |
| MFG. APPR. | DD       | D5149                                                                                                                                                                                                                                                                                   | SHEET 3 OF 11 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                                   | SCALE         |
| DE APPR.   | DS       | STEP ASSEMBLY                                                                                                                                                                                                                                                                           | NTS           |
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| ITEM | QTY-043W | P/N        | DESCRIPTION            |
|------|----------|------------|------------------------|
|      | X        | D5149-043W | AFT STEP BASE WELDMENT |
| 1    | 1        | D5149-5    | STEP CAP               |
| 2    | 1        | D5149-7    | AFT STEP BASE          |
| 3    | 1        | D5149-9    | AFT STEP               |



**D5149-043W AFT STEP BASE WELDMENT**

**NOTES:**

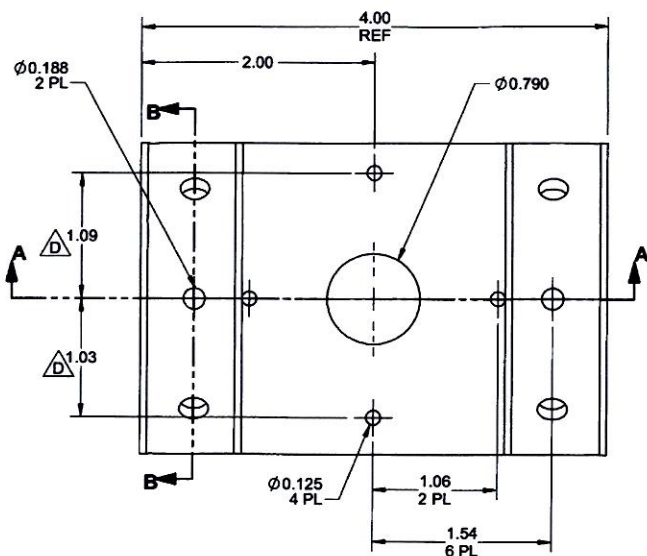
- 1) MATERIAL: N/A
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
POWDER COAT "WHITE" (4.3.5.1) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.67 lbs
- 8) WELDING PER DART QSI 004
- 9) APPLY BLACK ANTI-SKID PAINT TO STEP TUBE, ALL AROUND PER DART QSI 005 4.4
- 10) ALIGN D5149-9 AFT STEP WITH EDGE OF ALIGNMENT HOLES IN D5149-7 AFT STEP BASE PRIOR TO WELDING

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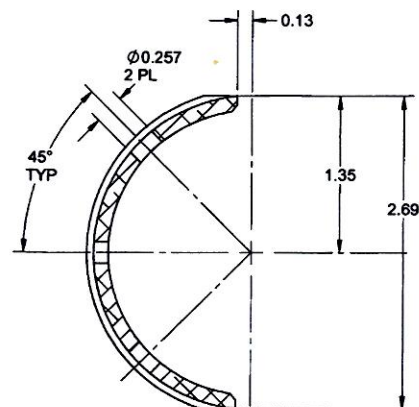
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|                                                                                                                                                                                                                                |          |                                        |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|---------------|
| DESIGN                                                                                                                                                                                                                         | DB       | <b>DART AEROSPACE LTD</b>              |               |
| DRAWN                                                                                                                                                                                                                          | AP       | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED                                                                                                                                                                                                                        | DB       | DRAWING NO.                            | REV. D        |
| MFG. APPR.                                                                                                                                                                                                                     | DD       | <b>D5149</b>                           | SHEET 4 OF 11 |
| APPROVED                                                                                                                                                                                                                       | WM       | TITLE                                  | SCALE         |
| DE APPR.                                                                                                                                                                                                                       | DS       | <b>STEP ASSEMBLY</b>                   | NTS           |
| DATE                                                                                                                                                                                                                           | 15.10.20 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |               |
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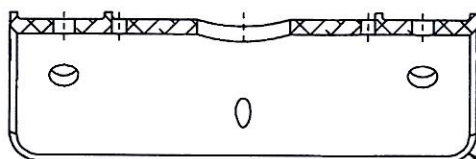




**D5149-1 FWD STEP BASE**  
(MAKE FROM D5149-1TRN)



**SECTION B-B**  
2 PL



**SECTION A-A**

0.06 X 45° CMF  
ALL AROUND INSIDE EDGE

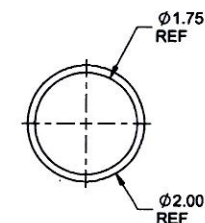
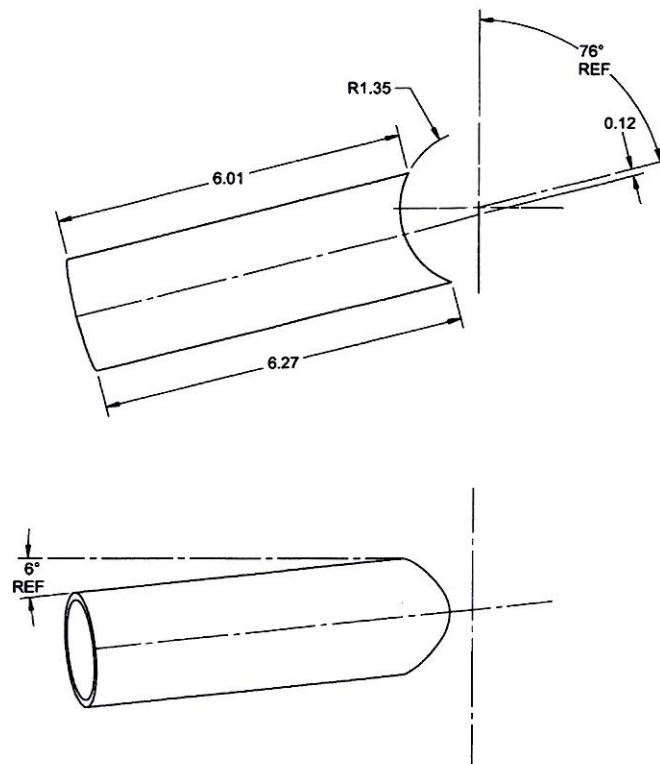
**NOTES:**

- 1) MATERIAL: MAKE FROM D5149-1TRN
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.20 lbs

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|                                                                                                                                                                                                                                |          |                                        |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|---------------|
| DESIGN                                                                                                                                                                                                                         | DB       | <b>DART AEROSPACE LTD</b>              |               |
| DRAWN                                                                                                                                                                                                                          | AP       | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED                                                                                                                                                                                                                        | DB       | DRAWING NO.                            | REV. D        |
| MFG. APPR.                                                                                                                                                                                                                     | DD       | <b>D5149</b>                           | SHEET 5 OF 11 |
| APPROVED                                                                                                                                                                                                                       | WM       | TITLE                                  | SCALE         |
| DE APPR.                                                                                                                                                                                                                       | DS       | <b>STEP ASSEMBLY</b>                   | NTS           |
| DATE                                                                                                                                                                                                                           | 15.10.20 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |               |
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# **D5149-3 FWD STEP**

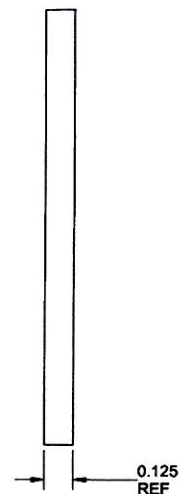
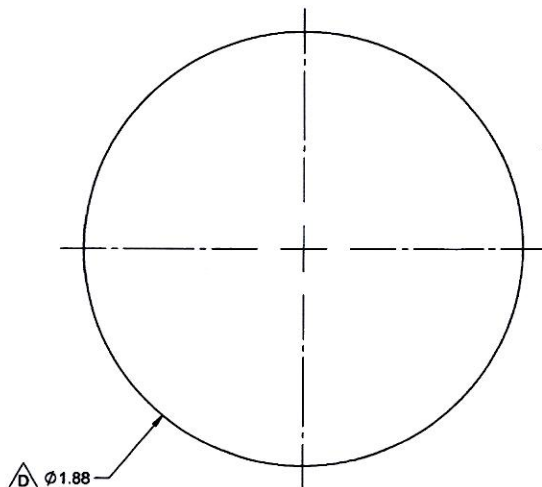
## **NOTES:**

- 1) MATERIAL: 6061-T6/T62/T6510/T6511 SEAMLESS TUBING PER WW-T-700/6 OR QQ-A-200/8 OR QQ-A-225/8 OR AMS 4080 OR AMS 4082 OR AMS 4083 OR ASTM B210 OR ASTM B241  
REF DART SPEC M6061T6T2.000W0.125
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.42 lbs

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2015-11-04

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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|---------------|
| DESIGN                                                                                                                                                                                                                         | DB       | <b>DART AEROSPACE LTD</b>              |               |
| DRAWN                                                                                                                                                                                                                          | AP       | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED                                                                                                                                                                                                                        | DB       | DRAWING NO.                            | REV. D        |
| MFG. APPR.                                                                                                                                                                                                                     | DD       | <b>D5149</b>                           | SHEET 6 OF 11 |
| APPROVED                                                                                                                                                                                                                       | WM       | TITLE                                  | SCALE         |
| DE APPR.                                                                                                                                                                                                                       | DS       | <b>STEP ASSEMBLY</b>                   | NTS           |
| DATE                                                                                                                                                                                                                           | 15.10.20 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |               |
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# **D5149-5 STEP CAP**

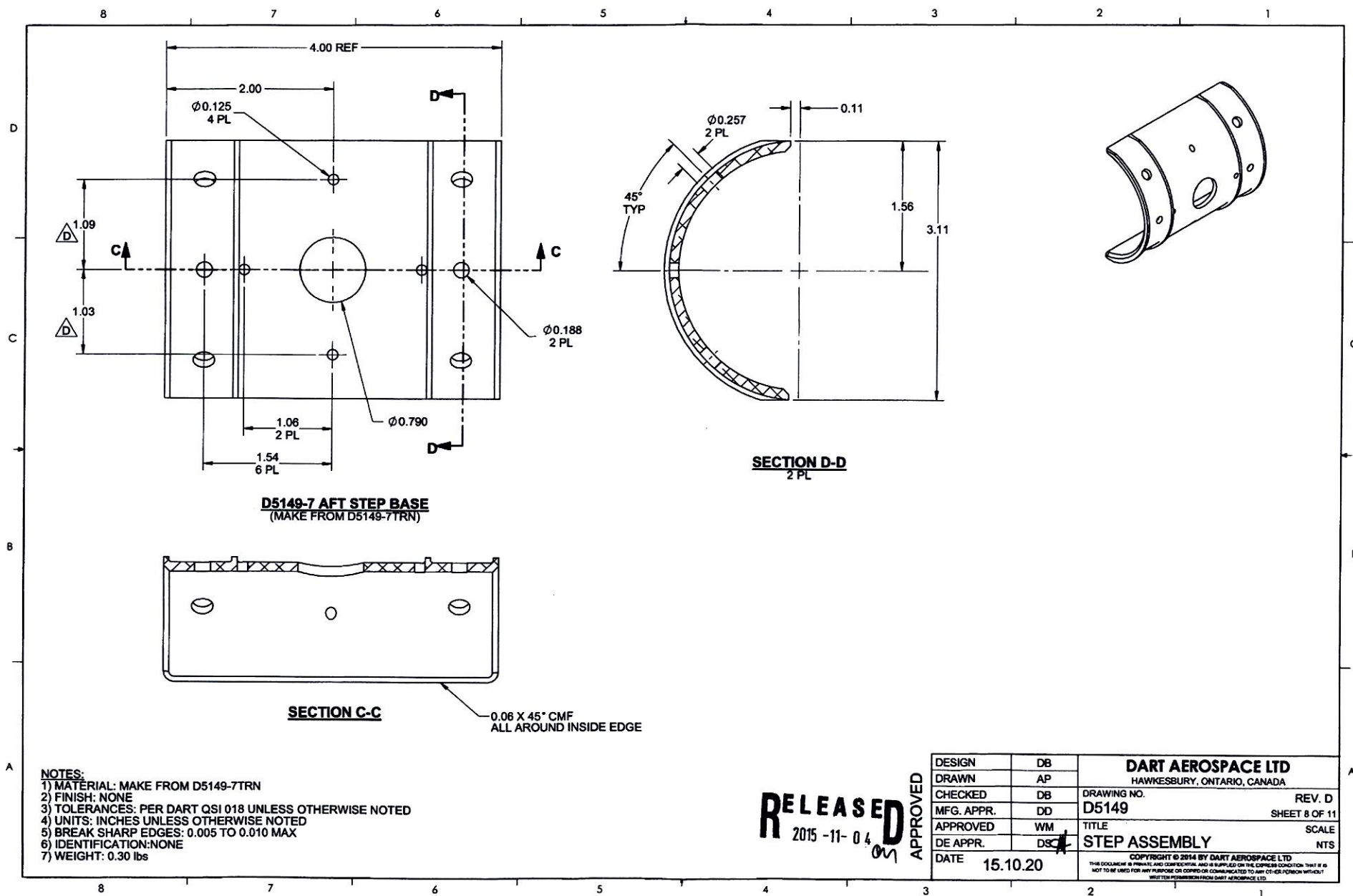
## **NOTES:**

- 1) MATERIAL: 6061-T6 (OR 6061-T62) ALUMINUM SHEET, 0.125 THICK  
PER QQ-A-250/11 OR AMS-QQ-A-250/11 OR AMS 4025 OR AMS 4027 OR ASTM B209  
REF DART SPEC M6061T6S.125
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.03 lbs

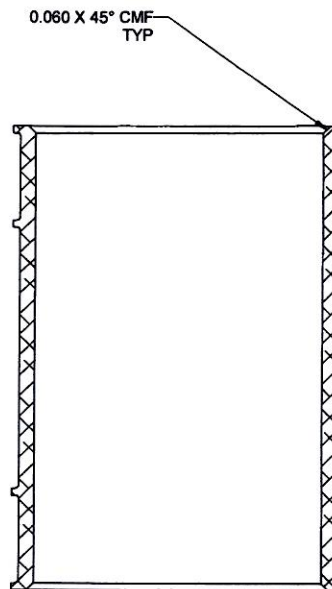
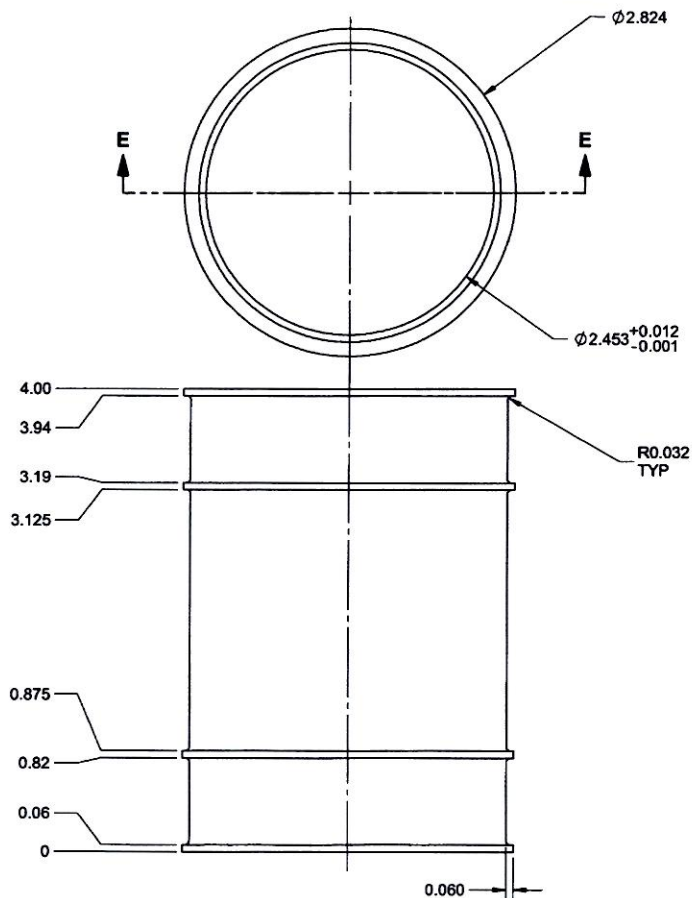
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|            |          |                                                                                                                                                                                                                                                                                        |               |
|------------|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| DESIGN     | DB       | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                               |               |
| DRAWN      | AP       |                                                                                                                                                                                                                                                                                        |               |
| CHECKED    | DB       | DRAWING NO.                                                                                                                                                                                                                                                                            | REV. D        |
| MFG. APPR. | DD       | D5149                                                                                                                                                                                                                                                                                  | SHEET 7 OF 11 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                                  | SCALE         |
| DE APPR.   | DS       | STEP ASSEMBLY                                                                                                                                                                                                                                                                          | NTS           |
| DATE       | 15.10.20 | COPYRIGHT © 2014 BY DART AEROSPACE LTD<br><small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small> |               |







**SECTION E-E**

**D5149-1TRN TURNING DETAIL**

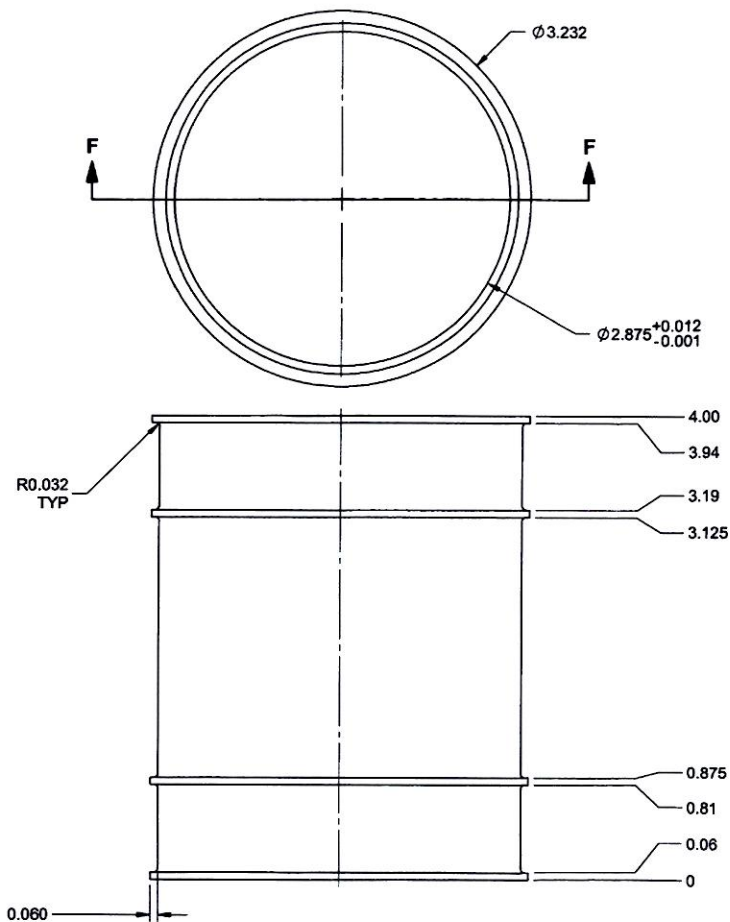
**NOTES:**

- 1) MATERIAL: 6061-T6/T651/T6510/T6511/T62 ALUMINUM ROUND BAR  
PER QQ-A-225/8 OR AMS-QQ-A-225/8 (OR AMS 4117/4128/4115/4116)  
OR QQ-A-200/8 OR AMS-QQ-200/8 (OR AMS 4160) OR ASTM B211 OR ASTM B221  
REF DART SPEC. M6061T6R
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.41 lbs

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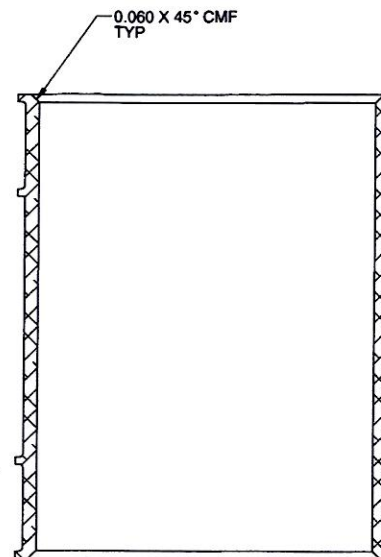
|                                                                                                                                                                                                                                |          |                                        |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|---------------|
| DESIGN                                                                                                                                                                                                                         | DB       | <b>DART AEROSPACE LTD</b>              |               |
| DRAWN                                                                                                                                                                                                                          | AP       | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED                                                                                                                                                                                                                        | DB       | DRAWING NO.                            | REV. D        |
| MFG. APPR.                                                                                                                                                                                                                     | DD       | D5149                                  | SHEET 9 OF 11 |
| APPROVED                                                                                                                                                                                                                       | WM       | TITLE                                  | SCALE         |
| DE APPR.                                                                                                                                                                                                                       | DS       | STEP ASSEMBLY                          | NTS           |
| DATE                                                                                                                                                                                                                           | 15.10.20 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |               |
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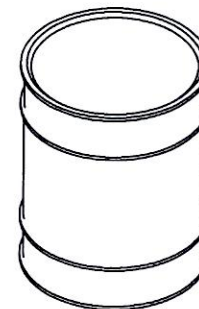
**D5149-7TRN TURNING DETAIL**

**NOTES:**

- 1) MATERIAL: 6061-T6/T651/T6510/T6511/T62 ALUMINUM ROUND BAR  
PER QQ-A-225/8 OR AMS-QQ-A-225/8 (OR AMS 4117/4128/4115/4116)  
OR QQ-A-200/8 OR AMS-QQ-200/8 (OR AMS 4160) OR ASTM B211 OR ASTM B221  
REF DART SPEC. M6061T6R
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.41 lbs



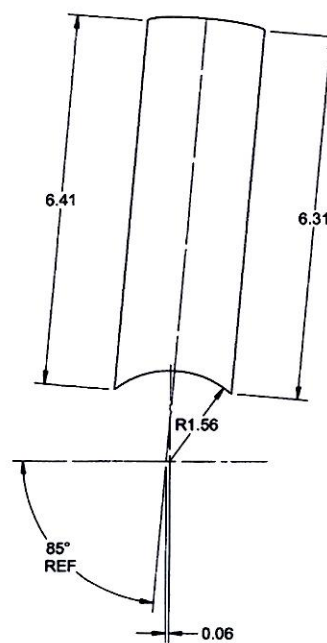
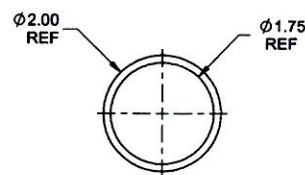
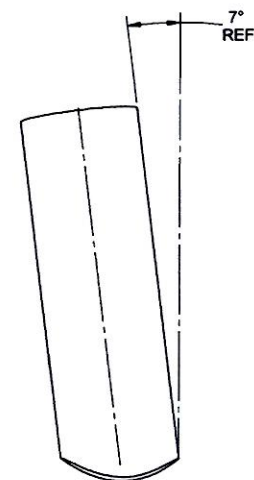
**SECTION F-F**



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|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------|----------------|
| DESIGN                                                                                                                                                                                                                         | DB       | <b>DART AEROSPACE LTD</b>              |                |
| DRAWN                                                                                                                                                                                                                          | AP       | HAWKESBURY, ONTARIO, CANADA            |                |
| CHECKED                                                                                                                                                                                                                        | DB       | DRAWING NO.                            | REV. D         |
| MFG. APPR.                                                                                                                                                                                                                     | DD       | <b>D5149</b>                           | SHEET 10 OF 11 |
| APPROVED                                                                                                                                                                                                                       | WM       | TITLE                                  | SCALE          |
| DE APPR.                                                                                                                                                                                                                       | DS       | <b>STEP ASSEMBLY</b>                   | NTS            |
| DATE                                                                                                                                                                                                                           | 15.10.20 | COPYRIGHT © 2014 BY DART AEROSPACE LTD |                |
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# **D5149-9 AFT STEP**

## **NOTES:**

- 1) MATERIAL: 6061-T6/T62/T6510/T6511 SEAMLESS TUBING PER WW-T-700/6 OR QQ-A-200/8 OR QQ-A-225/8 OR AMS 4080 OR AMS 4082 OR AMS 4083 OR ASTM B210 OR ASTM B241  
REF DART SPEC M6061T6T2.000W0.125
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: 0.44 lbs

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|------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| DESIGN     | DB       | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                                |                |
| DRAWN      | AP       | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                              |                |
| CHECKED    | DB       | DRAWING NO.                                                                                                                                                                                                                                                                              | REV. D         |
| MFG. APPR. | DD       | <b>D5149</b>                                                                                                                                                                                                                                                                             | SHEET 11 OF 11 |
| APPROVED   | WM       | TITLE                                                                                                                                                                                                                                                                                    | SCALE          |
| DE APPR.   | DS       | <b>STEP ASSEMBLY</b>                                                                                                                                                                                                                                                                     | NTS            |
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